

P.2/24

CENTRAL FAX CENTER

FEB 14 2008

<h1 style="text-align: center;">FEE TRANSMITTAL for FY 2007</h1> <p style="text-align: center;"><i>Patent fees are subject to annual revision.</i></p>		Complete if Known	
		Application Number	10/815,904
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	March 31, 2004
		First Named Inventor	Eric F. Varmerson
		Examiner Name	Huisman, David J.
TOTAL AMOUNT OF PAYMENT		Art Unit	2183
		Attorney Docket No.	42P19126
(\$) 930.00			

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakey, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	<input checked="" type="checkbox"/> Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.	

FEE CALCULATION

1. EXTRA CLAIM FEES

1. EXTRA CLAIM FEES		Base Claims	Fee from below	Fee Paid
Total Claims	16	0	50.00	\$0.00
Independent Claims	3	0	210.00	\$0.00
Multiple Dependent				

Large Entity		Small Entity		Pat. Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	210	2201	105	Independent claims in excess of 3
1203	370	2203	185	Multiple Dependent claim, if not paid
1204	810	2204	405	**Reissue independent claims over original patent
1205	810	2205	405	**Reissue claims in excess of 20 and over original patent

*or number previously paid. If greater. For Ref. sur. see below

SUBTOTAL (1)

(\$)	0.00
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2. ADDITIONAL FEES

Large Entry		Small Entry		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	460	2252	230	Extension for reply within second month
1253	1,050	2253	525	Extension for reply within third month
1254	1,640	2254	820	Extension for reply within fourth month
1255	2,230	2255	1,115	Extension for reply within fifth month
1401	510	2401	255	Notice of Appeal
1402	510	2402	255	Filing a brief in support of an appeal
1403	1,020	2403	515	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1808	180	1808	180	Submission of Information Disclosure Stmt
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify) _____


RCE _____

Other fee (specify)

RCE


SUBTOTAL (2)

(\$)	930.00
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SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Ashley R. Essick	Registration No. (Attorney/Agent)	55,515	Telephone	(303) 740-1980
Signature				Date	02/14/08

Based on PTO/SB-17 (02-07) as modified by Blakey, Sokoloff, Taylor & Zafman (w/r) 02/26/2007.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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Signature				Date	02/14/08

PAGE 3/24 * RCVD AT 2/14/2008 4:47:42 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/34 * DNIS:2738300 * CSID:3037406962 * DURATION (mm-ss):06-14